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1. CORRESPONDENCE ADDRESS

LAWRENCE E. EVANS, JR.
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ST. LOUIS MO 63101-2409

C2M1/1009

DEC 19 1997

2. INVENTOR(S) ADDRESS CHANGE (Complete only if there is a change)

INVENTOR'S NAME

Street Address

City, State and Zip Code

CO-INVENTOR'S NAME

Street Address

City, State and Zip Code

☐ Check if additional changes are enclosed

APPLICATION NO.

FILING DATE

TOTAL CLAIMS

EXAMINER AND GROUP ART UNIT

DATE MAILED

08/589,117

01/19/96

009

WEAVER, S

3207

10/09/97

First Named
Applicant

BROWN,

CRAIG E.

TITLE OF
INVENTION: NURSING BOTTLE WITH AN AIR VENTING STRUCTURE
(AS AMENDED)

ATTY'S DOCKET NO.

CLASS-SUBCLASS

BATCH NO.

APPLN. TYPE

SMALL ENTITY

FEE DUE

DATE DUE

3

12740-00002

215-011.500

S88

UTILITY

YES

\$660.00

01/09/98

3. Correspondence address change (Complete only if there is a change)

01/13/1998 RJOHNSON 00000046 08589117
01 FC:242 660.00 OP

4. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR, alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed.

1 Herzog, Crebs &
McGhee, LLP

2

3

5. ASSIGNMENT DATA TO BE PRINTED ON THE PATENT (print or type)

(1) NAME OF ASSIGNEE:

New Vent Designs, Inc.

(2) ADDRESS: (CITY & STATE OR COUNTRY)

St. Louis, Missouri

6a. The following fees are enclosed:

☒ Issue Fee ☐ Advance Order - # of Copies

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The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee to the application identified above.

(Authorized Signature)

(Date)

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Box ISSUE FEE
Assistant Commissioner for Patents
Washington, D.C. 20231

Express Mail
E-m334960243 US

on: December 18, 1997

(Date)

Sheila K. Frey

(Name of person making deposit)

Sheila K. Frey

(Signature)

December 18, 1997

(Date)

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